

**Index of Claims**

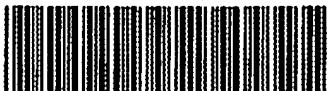
**Application/Control No.**
**09/517,127**
**Applicant(s)/Patent under Reexamination**
**MOORE ET AL.**
**Examiner**
**Art Unit**
**Timothy V. Eley**
**3724**

<input checked="" type="checkbox"/>	<b>Rejected</b>	<input type="checkbox"/>	<b>(Through numeral) Cancelled</b>	<input type="checkbox"/>	<b>Non-Elected</b>	<input type="checkbox"/>	<b>Appeal</b>
<input checked="" type="checkbox"/>	<b>Allowed</b>	<input type="checkbox"/>	<b>Restricted</b>	<input type="checkbox"/>	<b>Interference</b>	<input type="checkbox"/>	<b>Objected</b>

Claim	Date
Final	Original
1	9/8/05
2	
3	
4	
5	
6	
7	
8	✓
9	✓
10	0
11	✓
12	
13	
14	
15	
16	
17	
18	
19	
20	✓
21	
22	✓
23	
24	
25	
26	✓
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	✓
40	0
41	0
42	0
43	0
44	0
45	0
46	✓
47	✓
48	✓
49	
50	

Claim	Date
Final	Original
51	9/8/05
52	
53	
54	
55	
56	
57	
58	✓
59	
60	
61	
62	
63	
64	
65	0
66	
67	✓
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Claim	Date
Final	Original
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	0
144	
145	
146	
147	
148	
149	
150	

**Index of Claims (continued)**

**Application/Control No.**
**09/517,127**
**Applicant(s)/Patent under  
Reexamination**
**MOORE ET AL.**
**Examiner**
**Timothy V. Eley**
**Art Unit**
**3724**
*Pg. 2*

<input checked="" type="checkbox"/>	<b>Rejected</b>
=	<b>Allowed</b>

<input type="checkbox"/>	<b>(Through numeral) Cancelled</b>
+	<b>Restricted</b>

<input type="checkbox"/>	<b>Non-Elected</b>
I	<b>Interference</b>

<input type="checkbox"/>	<b>Appeal</b>
O	<b>Objected</b>

Claim	Date
Final	Original
151	9/8/05
152	
153	
154	
155	
156	
157	
158	
159	
160	
161	
162	
163	
164	
165	
166	
167	
168	✓
169	
170	
171	
172	
173	
174	
175	
176	
177	
178	
179	
180	
181	
182	
183	
184	
185	
186	
187	
188	
189	
190	
191	
192	
193	
194	
195	
196	
197	
198	
199	
200	

Claim	Date
Final	Original
201	
202	
203	
204	
205	
206	
207	
208	
209	
210	
211	
212	
213	
214	
215	
216	
217	
218	
219	
220	
221	
222	
223	
224	
225	
226	
227	
228	
229	
230	
231	
232	
233	
234	
235	
236	
237	
238	
239	
240	
241	
242	
243	
244	
245	
246	
247	
248	
249	
250	

Claim	Date
Final	Original
251	
252	
253	
254	
255	
256	
257	
258	
259	
260	
261	
262	
263	
264	
265	
266	
267	
268	
269	
270	
271	
272	
273	
274	
275	
276	
277	
278	
279	
280	
281	
282	
283	
284	
285	
286	
287	
288	
289	
290	
291	
292	
293	
294	
295	
296	
297	
298	
299	
300	